MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/581715 **FILING DATE**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1					51						
2			1		1			52						
3		2			1			53						
4		2			1			54						
5	1		1					55						
6		1			1			56						
7					1			57						
8	1							58						
9		1	1					59						
10		2			1			60						
11		2			1			61						
12		2			1			62						
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47								97						
48								98						
49								99						
50								100						
TOTAL IND.		↓	3	↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.		←	9	←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS			12					TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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